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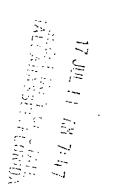
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COVER LETTER

	stration Section sion of Corporations					
SUBJECT:	JMG CUSTOM CARPENTRY, LLC					
SUBJECT	Name of Limited Liability Company					
Dear Sir or M	√adam:					
The enclosed	l Registered Agent/Registered Offic	ce Change a	nd fee(s) are submitted for filing.			
Please return all correspondence concerning this matter to the following:						
SHERRY	M. BERNAL, ESQ.					
	Name of Person		<u> </u>			
BERNAL 8	& BERNAL, P.A.					
	Firm/Company					
549 NW L	AKE WHITNEY PLACE, SUIT	E 102				
	Address					
PORT ST.	LUCIE, FL 34986					
	City/State and Zip Code					
SHERRY.	BERNAL@BERNALLEGAL.C	ОМ				
E-mail address: (to be used for future annual report notification)						
For further in	nformation concerning this matter,	please cali:				
Sherry M.	Bernal	772	224-2663			
	Name of Person	_ *** (Area Code & Daytime Telephone Number			
Regi Divi Clift 2661 Talla	stration Section sion of Corporations on Building Executive Center Circle ahassee, Florida 32301	 	MAILING ADDRESS: Registration Section Division of Corporations 2.O. Box 6327 Fallahassee, Florida 32314			
	losed is a check for the following					
2 \$1	25 Filing Fee		\$55 Filing Fee & Certified Copy			

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. N	ame of the limited liability company:	OM CARP	ENTRY, LLC
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) 1002 SW HAMROCK AVENUE	, 	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) 1002 SW HAMROCK AVENUE
	PORT ST. LUCIE, FL 34953	<u> </u>	PORT ST. LUCIE, FL 34953
	06/15/2017	L	17000134083
3.	Date of filing/registration in Florida	4.	Document number
	Registered Agent and Registered Office shown on the records of JASON M. GEORGE Registered Office Address (MUST BE FLORIDA STREET) 1401 NE 14TH COURT, APT. 10	ept. of State:	
	·	34957	
(h)	Enter name of NEW Registered Agent and/or NEW Registere JASON M. GEORGE		
	NEW Registered Office Address:		
	1002 SW HAMROCK AVENUE		
	PORT ST. LUCIE, FI	_L 34953	<u>.</u>
the cha agent v was/wa	imited liability company is not organized under the lange or changes are made, the Florida street address owill be identical. Or, in the case of a Florida limited I ere authorized by an affirmative vote of the members icles of organization or the operating agreement of the	of the registe iability com of the limite e limited lial	red office and the business office of the registered pany, it is hereby confirmed that the change(s) d liability company or as otherwise provided in
Signa	une of a member or authorized representative of a member		Printed or typed name of signee
I here provisi the obl to mer notified	by accept the appointment as registered agent and agions of all statutes relative to the proper and complete ligations of my position as registered agent as provide ely reflect a change in the registered office address, I d in writing of this change.	gree to act in e performan ed for in Che hereby conj	this capacity. I further agree to comply with the ce of my duties, and I am familiar with and accept upter 603, F.S. Or, if this document is being filed irm that the limited liability company has been
Signation	re of Registered Agent		

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25.00